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Application Number	10/628,634
Filing Date	07/28/2003
First Named Inventor	KLING, JEAN CHRISTOPHE JACQUES
Art Unit	3635
Examiner Name	JESSICA LAUX
Attorney Docket Number	02-015

JACQUES

I hereby revoke all previous powers of attorney given in the above-identified application.

A Power of Attorney is submitted herewith.

OR

I hereby appoint the practitioners associated with the Customer Number:

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I am the:

Applicant/Inventor.

Assignee of record of the entire interest. See 37 CFR 3.71.
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)

SIGNATURE of Applicant or Assignee of Record

Signature	<i>CKling</i>		
Name	JEAN CHRISTOPHE KLING		
Date	2/20/2007	Telephone	303 499 8227

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.

Total of 1 forms are submitted.

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